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P19771.A0



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Susumu SEINO et al.

Serial No. : 09/617,099

Group Art Unit : 1653

Filed : July 14, 2000

Examiner : Rita Mitra

For : PROTEIN RIM2

SUPPLEMENTAL PRELIMINARY AMENDMENT

Assistant Commissioner of Patents
Washington, D.C. 20231

Sir:

Further to the Preliminary Amendment filed July 14, 2000, prior to an examination of the above-identified patent application, the Examiner is respectfully requested to amend the application as follows:

IN THE SPECIFICATION

Please replace the Sequence Listing section with the Sequence Listing submitted herewith.

REMARKS

The Examiner is respectfully requested to enter the foregoing amendment prior to examination of the above-identified patent application. In this regard, the present amendment is directed to replacing the originally filed Sequence Listing with the Sequence Listing being filed herewith.

In re application of : Susumu SEINO

Serial No. : 09/617,099

Filed : July 14, 2000

For : PROTEIN RIM2

Box Non-Fee
Group Art Unit : 1653

Examiner : Rita Mitra

THE COMMISSIONER OF PATENTS AND TRADEMARKS
 Washington, D.C. 20231

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TECH CENTER 1600/2900

Sir:

Transmitted herewith is a Supplemental Preliminary Amendment in the above-captioned application.

Small Entity Status of this application under 37 C.F.R. 1.9 and 1.27 has been established by a verified statement previously filed.

A verified statement to establish small entity status under 37 C.F.R. 1.9 and 1.27 is enclosed.

An Information Disclosure Statement, PTO Form 1449, and references cited.

A Response to Notice Dated June 26, 2001 and Statement that the Content of Paper and Computer Readable Copies are the Same (including a diskette containing sequence listing and paper/written copy of the same).

No additional fee is required.

The fee has been calculated as shown below:

Claims After Amendment	No. Claims Previously Paid For	Present Extra	Small Entity		Other Than A Small Entity	
			Rate	Fee	Rate	Fee
Total Claims: 15	*20	0	x 9=	\$0.00	x 18=	\$
Indep. Claims: 2	**3	0	x 40=	\$0.00	x 80=	\$
Multiple Dependent Claims Presented			+135=	\$0.00	+270=	\$
Extension Fees for Month				\$0.00		\$
			Total:	\$0.00	Total:	\$

*If less than 20, write 20

**If less than 3, write 3

 Please charge my Deposit Account No. 19-0089 in the amount of \$_____. N/A A Check in the amount of \$_____ to cover the filing/extension fee is included. The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 19-0089. Any additional filing fees required under 37 C.F.R. 1.16. Any patent application processing fees under 37 C.F.R. 1.17, including any required extension of time fees in any concurrent or future reply requiring a petition for extension of time for its timely submission (37 CFR 1.136)(a)(3).

Steven J. Bernstein
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